## 10020020875

FEC FORM 1

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## STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE

10 JAN 14 PM 1:51

(See instructions)

Office use only

|  | · · · · · · · · · · · · · · · · · · ·    |  | Office use only |                                 |
|--|--|--|-----------------|---------------------------------|
| NAME OF<br>COMMITTEE (in full)                             | (Check if name is changed)               | Example: If typying, type over the lines                                     | 12FE4M5         |                                 |
| BLUMENTHAL FO  | R SENATE                                 |  | <u> </u>        |                                 |
|  |  |  |                 |                                 |
| ADDRESS (number and street)                                | 777 SUMMER STREE                         | :T<br>   |                 |                                 |
| (Check if address is changed)                              |  |  |                 |                                 |
|  | STAMFORD                                 |  | LGT L           | 06901 -                         |
|  |  | CITY▲  | STATE           | ZIP CODE 📥                      |
| COMMITTEE'S E-MAIL AL                                      | DDRESS (Please provide only one e        | -mail address)   |                 |                                 |
| (Check if address is changed)                              | mcacace@lawcts.co                        |  | <u> </u>        |                                 |
|  |  |  |                 |                                 |
| COMMITTEE'S WEB PAG  | GE ADDRESS (URL)                         |  |                 |                                 |
| (Check if address is changed)                              | www.richardblument                       | thal.com   | <u> </u>        |                                 |
|  | <u> </u>                                 |  |                 |                                 |
| 2. DATE M.M.M.  3. FEC IDENTIFICATIO  4. IS THIS STATEMENT |  | C AMENDED (A)  | ]               |                                 |
| I certify that I have examined                             | this Statement and to the best of my kno | owledge and belief it is true, correct a                                     | ind complete    |                                 |
| Type or Print Name of Tre                                  |  |  |                 |                                 |
| Signature of Treasurer                                     | Ellen Ca                                 | mhe_   | Date Date       | 6.8 2010                        |
| NOTE: Submission of false, e                               | erroneous, or incomplete information may | subject the person signing this Stat   |                 | of 2 U.S.C. §437g.              |
| Office<br>Use<br>Only                                      |  | For further information<br>Federal Election Commis<br>Toll Free 800-424-9530 |                 | FEC FORM 1<br>(Revised 02/2009) |